DECLARATION and POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled <u>A TECHNIQUE FOR CREATING A MACHINE TO ROUTE NON-PACKETIZED DIGITAL</u>

	SI	G٢	NAL	S	USII	٧G	DIS	TRIE	BUTED	RAM
--	----	----	-----	---	------	----	-----	------	-------	-----

the specification of which (check one)		
X is attached hereto.		
was filed on	as Application Serial No.	and was
amended on		
(if applicable).		

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by the amendment(s) referred to above.

I acknowledge the duty to disclose information which is material to the patentability of this application in accordance with Title 37, Code of Federal Regulation, $\pm 1.56(a)$.

I hereby claim foreign priority benefits under Title 35, United States Code, \ni 119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

PRIOR FOREIGN APPLICATION(S)

COUNTRY	APPLICATION	DATE OF FILING	PRIORITY CLAIMED
	NUMBER	(DAY, MONTH, YEAR)	UNDER 35 U.S.C. 119

I hereby claim the benefit under Title 35, United States Code, \$120 of any United States application (s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35 United States Code, \$112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, \$1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

PRIOR UNITED STATES APPLICATION(S)

APPLICATION SERIAL NUMBER	FILING DATE	STATUS (PATENTED, PENDING, ABANDONED)

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (list name and registration number)

Michael E. Marion, Reg. No. 32,266 Jack E. Haken, Reg. No. 26,902

SEND CORRESPONDENCE TO:	DIRECT TELEPHONE CALLS TO:
Corporate Patent Counsel;	Gregory L. Thorne
U.S. Philips Corporation; 580 White Plains Road;	(914) 333-9665
Tarrytown, NY 10591	

Dated:	1 100 10 100	Inventor's Signature:		
12 1	DEC 2000		Muse	-
Full Name	Last Name:	First Name :	Middle Name:	
of				!
Inventor	Christensen	Leo	Carl	i
Residence	City	State or Foreign Country	Country of Citizenship	
&				
Citizenship	South Jordan	Utah	USA	
Post	Street	City	State or Country	Zip Code
Office				
Address	2360 Bridle Oak Drive	South Jordan	Utah	84095

Dated:		Inventor's Signature:		
			1.6.1.	
Full Name of Inventor	Last Name:	First Name :	Middle Name:	
Residence City &		State or Foreign Country	Country of Citizenship	
Citizenship				T
Post Office Address	Street	City	State or Country	Zip Code

Dated:		Inventor's Signature:		
Full Name of Inventor	Last Name:	First Name :	Middle Name:	
Residence & Citizenship	City	State or Foreign Country	Country of Citizens	hip
Post Office Address	Street	City	State or Country	Zip Code